PART B - FEE(S) TRANSMITTAL

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SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

| APPLICATION N | JO. FILING | G DATE FIF | ST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. | | |
|---|--|---------------------------|---------------------|--|------------------------|---------------------|------------------|--------------------------|--|
| 10/542,641 07/1 | | 9/2005 | 005 Masayuki CHO | | Q89068 | | 1723 | | |
| TITLE OF INVENTION: CARBON NANOTUBE COATED WITH AROMATIC CONDENSATION POLYMER | | | | | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | ON PREV. | PAID ISSUE FEE | TOTAL FEE DUE | C(S) | DATE DUE | |
| nonprovisional | NO | \$1510.00 | \$300.00 | · | \$0.00 | \$1,810.00 | 1 | 06/02/2010 | |
| EXAMINER | | | ART UNIT | CLAS | SS-SUBCLASS | | | | |
|] | 1794 | 1794 428-403000 | | | | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363 2. For printing on the patent front page list 1 Sughrue Mion, PLLC | | | | | | | | | |
| \Box Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2 | | | | | |
| ☑ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required. | | | | v (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | | | | |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | | |
| TEIJIN LIMITED | Osaka, Jaj | oan | | | | | | | |
| Please check the appro | priate assignee categ | ory or categories (will n | ot be printed on th | e patent): 🗆 Inc | dividual ☑ Corporat | ion or other priva | te group | entity Government | |
| 4a. The following fee(s) are submitted: | | | 4b. Paymen | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) | | | | | |
| ☑ Issue Fee | | | ☐ A check | ☐ A check is enclosed. | | | | | |
| ☑ Publication Fee (No small entity discount permitted) | | | ☐ Payment | ☐ Payment by credit card. Form 1310-2038 is attached. | | | | | |
| ☐ Advance Order - # of Copies | | | | ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880. | | | | | |
| | | | | ☑ The USPTO is directed and authorized to charge all required fees to Deposit Account No. <u>19-4880</u> . Please also credit any overpayments to said Deposit Account. | | | | | |
| 5. Change in Entity Sta | tus (from status indi- | cated above) | | | | | | | |
| ☐ a. Applicant claims | SMALL ENTITY sta | atus. See 37 CFR 1.27. | ☐ b. Applic | ant is no longer | claiming SMALL H | ENTITY status. S | ee 37 Cl | FR 1.27(g)(2). | |
| The Director of the US | PTO is requested to a | pply the Issue Fee and | Publication Fee (if | any) or to re-ap | ply any previously p | aid issue fee to th | e applic | ation identified above. | |
| NOTE: The Issue Fee a party in interest as show | | | | | the applicant; a regis | stered attorney or | agent; o | or the assignee or other | |
| Authorized Signature | Authorized Signature /Bruce E. Kramer/ | | | Date | | | May 27, 2010 | | |
| Typed or Printed Name | e 1 | Bruce E. Kramer | | Registration N | o. | 33,725 | | | |